

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)							SERIAL NO. <u>10/069214</u>	FILING DATE
							APPLICANT(S)	
1. CLAIMS								
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1						51		
2						52		
3						53		
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45						95		
46						96		
47						97		
48						98		
49						99		
50						100		
TOTAL IND.						TOTAL IND.		
TOTAL DEP.						TOTAL DEP.		
TOTAL CLAIMS						TOTAL CLAIMS		

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PTO-1340 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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